



PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING

MAR 2 8 2002

P.O. Box 747 • Falls Church Virginia 22040-0747 P.O. Box 747 • Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

MBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	WIDE BAND NORMA	L INCIDENT	TELESCOPE							
Fill in Appropriate Information -	the specification of which is attached hereto. If not attached hereto, the specification was filed on									
For Use Without	United States App	/// 1'1-1-	;							
Specification Attached:	and amended on		<u></u>		(if applicable	and/or				
	the specification was filed on				: and was					
	amended on	nication Nume	Der	(if applicable)						
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as									
	amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.									
	I do not know and do not believe the same was ever known or used in the United States of America before my or our invention									
	thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year									
	prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the									
	prior to this application, that the same was not in public use of or sale in the United States of America and the same was not in public use of the same was not in public as of America or an application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this									
	patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this									
	application by me or my legal representatives or assigns, except as follows. I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having									
	or inventor's certificate a filing date before tha	listed below a t of the applica	and have also identified belation on which priority is cl	ow any foreign application f aimed:	or patent or inventor's cert	ificate having				
	Prior Foreign Application(s)			Priority Claimed						
Insert Priority	2000-400417	ΙΔΡΔΝΙ		December 28, 2000						
Information: (if appropriate)	(Number)	(Country)		(Month/Day/Year Filed) Yes					
	2001-382599	IAPAN		December 17, 2001						
	(Number)	(Country)	(Month/Day/Year Filed) Yes	No					
	(1.142110.02)	(,	, , ,,						
	(Number) (Country))	(Month/Day/Year Filed)		No				
	(rvaniber)	(30)	,	(,),						
	(Number)	(Country)	(Month/Day/Year Filed		No				
	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.									
Insert Provisional Application(s): (if any)										
	(Application Number)			(Filing Date)						
	(Elling Date)									
	(Application Number)			(Filing Date)						
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:									
	Country Application Number			Date of Fil	ing (Month/Day/Year)					
Insert Requested										
Information: (if appropriate)										
	I hereby claim the benefit under Title 35, United States Code, \$120 of any United States and/or PCT application(s) listed below and,									
	incofar as the subject	matter of eac	h of the claims of this at	optication is not disclosed i	n the prior United States	ana/or PC.I				
	application in the man	insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available								
	between the filing date of the prior application and the national or PCT international filing date of this application.									
Insert Prior U.S.										
Application(s):	(Application Number)		(Filing Date)	(Status - pa	atented, pending, abandon	ed)				
(if any)										
	(Application Number)		(Filing Date)	(Status - pa	atented, pending, abandon	ed)				
Page 1 of 2 (Rev. 12/19/01)										





I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 2292

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

Full Name of First or Sole Inventor: Insert Name of Insert Date This Insert Date This Document is Signed

Insert Residence Insert Citizenship

Insert Post Office Address

Full Name of Second Inventor, if any: see above

Full Name of Third Inventor, if any: see above

Full Name of Fourth Inventor, if any:

Full Name of Fifth Inventor, if any:

Full Name of Sixth Inventor, if any: see above

I hereby declare that all statements made and belief are believed to be true; and further the like so made are punishable by fine or impute willful false statements may jeopardize the contractions.	that these statements were made with prisonment, or both, under Section 100 ne validity of the application or any pa	the knowledge t	hat willful talse statements
GIVEN NAME/FAMILY NAME Yoshiyuki TAKIZAWA Residence (City, State & Country) Saitama, Japan	B 2007 当 表 子 及 上	CITIZENSHI JAPANESE	DATE* Mar, 12, 2002.
MAILING ADDRESS (Complete Street Addit 2-1, Hirosawa, Wako-shi, Saitama, 351-0198,	· ·		
GIVEN NAME/FAMILY NAME Yoshiyuki TAKAHASHI	INVENTOR'S SIGNATURE	CITIZENSHI	DATE* Fd 21,2002
Residence (City, State & Country) Saitama, Japan MAILING ADDRESS (Complete Street Address)	ross including City, State & Country)	JAPANESE	
2-1, Hirosawa, Wako-shi, Saitama, 351-0198,	JAPAN		
GIVEN NAME/FAMILY NAME Toshikazu EBISUZAKI	INVENTOR'S SIGNATURE	CITIZENSHI	Pate* Feb. 28, 2002
Residence (City, State & Country) Saitama, Japan	/.	JAPANESE	ir
MAILING ADDRESS (Complete Street Add 2-1, Hirosawa, Wako-shi, Saitama, 351-0198,			
GIVEN NAME/FAMILY NAME Hirohiko M. SHIMIZU	inventor's signature 清水格秀	CIMICAL ICI	DATE* Mar. 12, 2002
Residence (City, State & Country) Saitama, Japan		JAPANESE	112
MAILING ADDRESS (Complete Street Add 2-1, Hirosawa, Wako-shi, Saitama, 351-0198,			
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
Residence (City, State & Country)		CITIZENSH	IP .
MAILING ADDRESS (Complete Street Addi	ress including City, State & Country)		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
Residence (City, State & Country)		CITIZENSH	IP
MAILING ADDRESS (Complete Street Add	ress including City, State & Country)		